DOCUMENT RESUME

ED 390 023 CG 027 001

AUTHOR Talley, Ronda C.; Short, Rick Jay

TITLE Education and Health Care Advocacy: Perspectives on Goals 2000, IASA, IDEA and Healthy People 2000. Digest.

INSTITUTION American Psychological Association, Washington, D.C.; ERIC Clearinghouse on Counseling and Student Services, Greensboro, NC.

SPONS AGENCY Office of Educational Research and Improvement (ED), Washington, DC.

PUB DATE 95

CONTRACT RR93002004

NOTE 7p.; Published as a part of a collection of eight digests prepared collaboratively by APA and ERIC/CASS, see CG 026 993.

PUB TYPE Information Analyses - ERIC Clearinghouse Products (071)

EDRS PRICE MF01/PC01 Plus Postage.

DESCRIPTORS Child Psychology; Consultants; Delivery Systems; *Educational Change; Elementary Secondary Education; Health Needs; *Health Promotion; Health Services; Psychological Evaluation; Psychology; School Counseling; School Policy; *School Psychologists; School Restructuring

IDENTIFIERS Goals 2000; Healthy People 2000; Improving Americas Schools Act 1994; Individuals with Disabilities Education Act

ABSTRACT

With the release of "A Nation at Risk" in 1983, Americans focused on the report's declaration of "a rising tide of mediocrity" in the schools, which suggested unacceptable results in the education of America's children and youth. Concurrent to the missives levied at schools' lack of progress with academics and other education-specific goals, policy makers and researchers also have questioned the nation's commitment to the health of its children. With the publication of "Healthy People 2000" (1990) attention was drawn to the dramatic and unmet health needs of preschool-aged youngsters. Spurred by these and other reports, school staff are reassessing traditional methods of doing business and are implementing innovations designed to produce a nation of "world-class citizens." The following topics are examined: (1) education reform; (2) health care reform; (3) human services reform: services integration; (4) legislative/policy responses to social reform; (5) Goals 2000: Educate America Act; (6) Improving America's Schools Act (IASA); (7) Individuals with Disabilities Education Act (IDEA); and (8) Healthy People 2000. Psychologists, as experts in education, health, and human services, have a responsibility to lend their skills and leadership to this challenge. Contains 28 references. (JBJ)

ED 390 023

Education and Health Care Advocacy: Perspectives on Goals 2000, IASA, IDEA and Healthy People 2000

by Ronda C. Talley and Rick Jay Short

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☐ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

CG027001

BEST COPY AVAILABLE

Psychologists, as experts in education, health, and human services, have a responsibility to lend their expertise, skills, and leadership to this tremendous challenge...

Education and Health Care Advocacy: Perspectives on Goals 2000, IASA, IDEA and Healthy People 2000

by

Ronda C. Talley Rick Jay Short

Overview

American education is changing. With the release of *A Nation at Risk* in 1983, the Americans focused on the report's declaration of "a rising tide of mediocrity" in the schools, which suggested unacceptable results in the education of America's children and youth (Talley & Short, 1995). Numerous other publications *(Beyond Rhetoric,* 1991; *Raising Standards for American Education,* 1992) have contributed to the criticism of schools and the educational process. Concurrent to the missives levied at schools' lack of progress with academics and other education-specific goals, policy makers and researchers also have questioned the nation's commitment to the health of its children. With the publication of *Healthy People 2000* (1990) by the U.S. Department of Health and Human Services, attention was drawn to the dramatic and unmet health needs of preschool and school-aged youngsters.

Spurred by these and other reports, school staff are reassessing traditional methods of doing business and are implementing innovations designed to produce a nation of "world-class citizens" (National Education Goals Panel, 1994). They also are striving to respond to these social reforms in education, health care, and human services within the schools.

Education Reform

The upheaval in the nation's education system has been noted and evaluated by numerous researchers and policy makers (Payzant, in press). The centerpiece of the current reform is a set of eight national educational goals enacted in the *Goals 2000: Educate America Act* (1994). It should be noted that education reform extends far beyond the eight national education goals; it reaches into the very fiber of school structures and management (Payzant, in press). Comprehensive education reform includes provisions such as site-based decision making and incentive structures designed to reward the performance of school personnel (Phillips & Boysen, in press).

Health Care Reform

The need for reform in our nation's health care system was recognized long before the current administration introduced the *Health Security Act of 1994* (HSA), which stimulated debate on this issue at state and local levels. Proposed health care reform legislation addressed schools as health service delivery sites (Talley & Short, in press) and as public health mechanisms (Talley & Short, 1994b). However, others (Centers for Disease Control & Prevention, 1993; Kolbe, 1995; Kolbe, Collins, & Cortese, in press) have articulated the relationship of health care to education. In their seminal article, Allensworth and Kolbe (1987) outlined eight components of school health: health education; physical education; health services; nutrition services; health promotion for staff; counseling, psychological, and social services; healthy school environment; and parent/community involvement.

Human Services Reform: Services Integration

Tackling education reform and health care reform simultaneously is an ambitious task. However, with increasingly complex student needs and the demands for accountability that accompany reform, more school systems are turning outward for assistance from parents, family members, businesses, community agencies, and other related organizations. School administrators and community leaders are realizing that they cannot help many students reach levels of accomplishment and well-being without providing more holistic, "wraparound" services. These forms of services integration are gaining increasing popularity as schools join with other agencies to offer comprehensive and coordinated service delivery systems for children and youth (Dryfoos, 1994; Paavola, et al., 1995, in press).

Legislative/Policy Responses to Social Reform

Based on the social reform movements mentioned previously, Congress and other governmental bodies have sought ways to respond to the needs inherent in each movement (Talley, 1995). The legislation and policy document discussed in the next section demonstrate advocates' attempts to support reformed schools at the national, state, and local levels.

Goals 2000: Educate America Act

P.L. 103-227, the Goals 2000: Educate America Act, authorized federal support for education reform. Signed into law on March 31, 1994, the major provisions of the eight goals were conceived at the Education Reform Summit of 1989, which was called by President Bush for the nation's governors. Summit attendees, lead by then-Governor Bill Clinton, hammered out a set of six education goals to direct the nation's effort in developing world-class students. Congress then added two additional goals. The Goals 2000 legislation states that by the year 2000, thefollowing objectives will be met:

Goal 1: *Readiness for School*. All children will start school ready to learn.

Goal 2: *School Completion*. The high school graduation rate will increase to at least 90 percent.

Goal 3: *Student Achievement and Citizenship*. All students will leave grades 4, 8, and 12 having demonstrated competency over challenging subject matter including English, mathematics, science, foreign languages, civics and government, economics, arts, history, and geography, and every school in America will ensure that all students learn to use their minds well, so that our students may be prepared for responsible citizenship,further learning, and productive employment in our Nation's modern economy.

Goal 4: *Teacher Education and Professional Development*. The Nation's teaching force will have both access to programs for the continued improvement of their professional skills and the opportunity to acquire the knowledge and skills needed to instruct and prepare all American students for the next century.

Goal 5: *Mathematics and Science*. United States students will be the first in the world in mathematics and science achievement.

Goal 6: *Adult Literacy and Lifelong Learning*. Every adult American will be literate and will possess the knowledge and skills necessary to compete in a global economy. Each adult will exercise the rights and responsibilities of citizenship.

Goal 7: *Safe, Disciplined, and Alcohol- and Drug-Free Schools*. Every school in the United States will be free of drugs, violence, and the unauthorized presence of firearms and alcohol and will offer a disciplined environment conducive to learning.

Goal 8: *Parental and Family Involvement*. Every school will promote partnerships that will increase parental involvement and participation in promoting the social, emotional, and academic growth of children.

In addition to codifying the eight national education goals, Goals 2000 created both a National Education Goals Panel (NEGP) to monitor progress toward the goals, and a system to certify national curriculum content standards, national pupil performance standards, national opportunity-to-learn standards, and state standards and assessment, all of which are voluntary (Stedman, 1994b). The Act also provides waivers of requirements and regulations under designated federal education programs, grants for implementation of state systemic reform efforts, and a national board to establish occupational skill standards (U.S. Department of Education, 1994, 1995). The Act contains numerous related provisions, many of which are being attacked by the 104th Congress now in session (Talley & Short, in press).

Each state Goals 2000 action plan must address the following elements: (a) teaching and learning standards, and assessment; (b) opportunity-to-learn standards or strategies; (c) governance, accountability, and management; (d) parent and community partnerships; (e) system-wide improvements; (f) bottom-up reform; (g) dropout prevention; (h) coordination for school-to-work programs; (i) milestones and timelines; (j) coordination strategies; and (k) program improvement (U.S. Department of Education, 1995).

Improving America's Schools Act (IASA)

The Improving America's Schools Act (IASA; P.L. 103-382) was signed into law on October 20, 1994. It rewrites the Elementary and Secondary Education Act of 1965 (ESEA), the largest single source of federal support for K-12 education in the United States, and authorizes its programs through 1999. Created as part of President Lyndon Johnson'sWar on Poverty, this $11-billion-a-year Act has provided federal assistance to poor schools, poor communities, and poor children for nearly 30 years. The Act authorizes most federal elementary and secondary education programs, including the Title I program, to provide compensatory education to educationally disadvantaged students. The IASA, while amending ESEA, also amends other legislation and establishes new programs (Stedman, 1994a).

Changes made to ESEA reflect the following broad themes:

(a) linkages are created between major ESEA programs and systemic education reform, particularly Goals 2000;

(b) states, localities, and schools will have increased administrative flexibility; (c) new foci on emerging areas of interest, such as technology, school safety, and school management, are included; and (d) there is greater targeting on students and schools with high needs.

With these amendments, several changes will be felt at the state and school levels. Future Title I funding is made contingent on State's having curriculum content and pupil performance standards, also a requirement under Goals 2000. In addition, the U.S. Department of Education is given authority to waive a wide array of requirements for ESEA programs for up to three years. Waivers may be extended if student performance has increased. States and local education agencies are also permitted to consolidate some program administration funds and transfer up to 5 percent of program funds under one area to another designated program. The IASA requires targeting of high-poverty schools and authorizes grants to reward states with high fiscal effort and low disparities in school finance programs.

Support is also provided for the infusion of technology into the curriculum, to underwrite schools' participation in the national information highway, to experiment with new forms of school management, such as public charter schools and private management of schools, and to increase school safety through the newly added component, the Safe and Drug-Free Schools and Communities Act.

Individuals with Disabilities Education Act (IDEA)

P. L. 94-142, the *Education for All Handicapped Children Act of 1975,* was amended in 1990 to become Part B of the *Individuals with Disabilities Education Act.* The IDEA mandates free appropriate public education (FAPE) in the least restrictive environment for all students with special educational needs. This premiere piece of legislation for special-needs students radically changed the way school psychologists served schools, moving them into a primarily testing-for-placement role. However,under the law, school psychologists are designated "related service providers" and can provide counseling and other therapeutic services for children if those services are written into a student's individual education program.

The original legislation was amended in 1986 by P. L. 99-457 to include children under the age of five. Children from three to five years of age were made eligible for FAPE under the Preschool Grants Program (Section 619, Part B), while Part H of the new law established a statewide comprehensive system of early intervention services for infants and toddlers. The law also requires service providers to develop a family-centered, multidisciplinary family service plan for each child and family.

Healthy People 2000

Healthy People 2000: National Health Promotion and Disease Prevention Objectives (1990) is a policy document, promulgated by the U.S. Department of Health and Human Services, that has as its major focus the nation's commitment to three broad goals:

- to increase the span of healthy life for Americans,
- to reduce health disparities among Americans, and
- to achieve access to preventive services for all Americans.

Healthy People 2000 presents 300 measurable targets or objectives to be met by the year 2000. These are organized into 22 priority areas, with 21 of them grouped as health promotion, health protection, or preventive services (data and surveillance activities constitute the 22nd area).

Combined with Goals 2000, Healthy People 2000 spotlights the important interrelationships between health and education for children and youth. At least 15 of the Healthy People 2000 objectives are directly achievable by schools. In addition, it is estimated that schools can play important roles in meeting nearly 100 additional Healthy People 2000 objectives (Kolbe, Collins, & Cortese, in press; U.S. Department of Health and Human Services, 1992).

A Call for Advocacy

Social reforms reflect society's attempt to address dramatic challenges to the social order; such reforms impact the population as a whole and children in particular. Since schools are a reflection of the communities in which they are embedded, social reform does not stop at the schoolhouse door, but rather is felt throughout the education system.

Challenges to educational excellence, threats to child safety and development, and malaise in a human services system which is oftenfragmented and dysfunctional, rarely addressing the needs of those it was designed to serve, all factor together to compel action. The legislation and policy described in this article are attempts to address one

of our nation's most serious challenges: the education and protection of our children. Psychologists, as experts in education, health, and human services, have a responsibility to lend their expertise, skills, and leadership to this tremendous challenge [to the education and protection of our children].

References

Allensworth, D. D., & Kolbe, L. J. (1987). The comprehensive school health program: Exploring an expanded concept. *Journal of School Health, 57*(10), 409-412.

Centers for Disease Control and Prevention. (1993). *Reports from the categorical workgroups of the first annual national school health conference.* (Available from the Centers for Disease Control and Prevention, 4770 Buford Highway, Atlanta, GA 30341-3274)

Dryfoos, J. G. (1994). *Full-service schools: A revolution in health and social services for children, youth, and families.* San Francisco: Jossey-Bass.

Goals 2000: Educate America Act, Pub. L. No. 103-227. 103rd Cong., 2d sess. (March 31, 1994).

Healthy people 2000: National health promotion and disease prevention objectives. (1990). (DHHS Publication No. (PHS) 91-50212). Washington, DC: U.S. Government Printing Office.

Individuals with Disabilities Education Act, Pub. L. No. 101-476. 101st Cong., (October 30, 1990).

Improving America's Schools Act, Pub. L. No. 103-382. 103rd Cong., (October 20, 1994).

Kolbe, L. J., Collins, J., & Cortese, P. (in press). Building the capacity of schools to improve the health of the nation: A call for assistance from psychologists. *American Psychologist.*

National Commission on Children. (1991). *Beyond rhetoric: A new American agenda for children and families.* Washington, DC: U.S. Government Printing Office.

National Commission on Excellence in Education. (1983). *A nation at risk: The imperative for educational reform.* Washington, DC: U.S. Department of Education.

National Council on Education Standards and Testing. (1992). *Raising standards for American education.* Washington, DC: U.S. Government Printing Office.

National Education Goals Panel. *National education goals report: Building a nation of learners. (*1994). Washington, DC: U.S. Government Printing Office.

Paavola, J. C., Carey, K., Cobb, C., Illback, R. J., Joseph, H. M., Jr., Routh, D., Torruella, A. (in press). Interdisciplinary school practice: Implications of the service integration movement for psychologists. *Professional Psychology: Research and Practice.*

Paavola, J. C., Cobb, C., Illback, R. J., Joseph, Jr., H. M., Torruella, A., & Talley, R. C. (1995). *Comprehensive and coordinated psychological services for children: A call for service integration.* Washington, DC: American Psychological Association.

Payzant, T. W. (in press). Education reform in the United States: National policy and legislation. *American Psychologist.*

Phillips, V., & Boysen, T. C. (in press). Psychology's role in state wide education reform: Kentucky as an example. *American Psychologist.*

Short, R. J., & Talley, R. C. (in press-a). Rethinking psychology and the schools: Implications of recent national social reform policy. *American Psychologist.*

Short, R. J., & Talley, R. C. (in press-b). Social reforms and the future of school practice: Implications for American psychology. *Professional Psychology: Research and Practice.*

Stedman, J. B. (1994a). *Goals 2000: Overview and analysis.* Washington, DC: Congressional Research Service.

Stedman, J. B. (1994b). *Improving America's Schools Act: An overview of P.L. 103-382.* Washington, DC: Congressional Research Service.

Talley, R. C. (1995). Best practices in APA policy and advocacy for school psychology practice. In A. Thomas & J. Grimes (Eds.), *Best practices in school psychology - III.* Washington, DC: National Association of School Psychologists.

Talley, R. C., & Short, R. J. (1994a). Health care reform and school psychology: A wake up call to school psychologists from school psychologists. *The School Psychologist, 48*(3), 1, 3, 15.

Talley, R. C., & Short, R. J. (1994b). Health care reform and the schools: Just the facts. *The School Psychologist, 48*(2), 1, 7, 11.

Talley, R. C., & Short, R. J. (1995). *Reforming America's schools: Psychology's role: A report to the nation's educators.* Washington, DC: American Psychological Association.

Talley, R. C., & Short, R. J. (in press). Schools as health service delivery sites: Current status and future directions. *Special Services in the Schools.*

Talley, R. C., Short, R. J., & Kolbe, L. J. (1995). *School Health: Psychology's role: A report to the nation's educators.* Washington, DC: American Psychological AssociationU.S. Department of Education. (1994). *Goals 2000: A world-class education for every child.* Washington, DC: Author.

U.S. Department of Education. (1995). *An invitation to your community: Building community partnerships for learning.* Washington, DC: Author.

U.S. Department of Health and Human Services. (1992). *Healthyschools: A directory of federal program and activities related to health promotion through the schools.* Washington, DC: Author.